

<b>CLAIMS ONLY</b>							SERIAL NO.		FILING DATE					
							APPLICANT(S)							
CLAIMS														
	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT			*		*		*		
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.	IND.	DEP.	
1	1													
2		1												
3														
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28		1												
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36	1													
37		1												
38			1											
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41			1											
42	1													
43		1												
44			1											
45	1													
46		1												
47			1											
48	1													
49		1												
50		1												
<b>TOTAL IND.</b>	<b>8</b>													
<b>TOTAL DEP.</b>	<b>42</b>													
<b>TOTAL CLAIMS</b>	<b>50</b>													

\* MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS

Best Available Copy